

B1 (Official Form 1) (4/10)

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF TEXAS SAN ANTONIO DIVISION		Voluntary Petition																				
Name of Debtor (if individual, enter Last, First, Middle): Reyes, Sr., Ronald J.		Name of Joint Debtor (Spouse) (Last, First, Middle): Reyes, Liza A.																				
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): dba Legend Realty Property Management; fdba ERA Legend Realty																				
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all): XXX-XX-3444		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all): XXX-XX-6708																				
Street Address of Debtor (No. and Street, City, and State): 626 Midway Crest San Antonio, TX		Street Address of Joint Debtor (No. and Street, City, and State): 626 Midway Crest San Antonio, TX																				
		ZIP CODE 78258																				
County of Residence or of the Principal Place of Business: Bexar		County of Residence or of the Principal Place of Business: Bexar																				
Mailing Address of Debtor (if different from street address):		Mailing Address of Joint Debtor (if different from street address):																				
		ZIP CODE																				
Location of Principal Assets of Business Debtor (if different from street address above):		ZIP CODE																				
Type of Debtor (Form of Organization) (Check one box.) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)		Nature of Business (Check one box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other <hr/> Tax-Exempt Entity (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input checked="" type="checkbox"/> Chapter 13 <hr/> Nature of Debts (Check one box.) <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> Debts are primarily business debts.																			
Filing Fee (Check one box.) <input checked="" type="checkbox"/> Full Filing Fee attached. <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Check one box: Chapter 11 Debtors <input type="checkbox"/> Debtor is a small business debtor as defined by 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (<i>amount subject to adjustment on 4/01/13 and every three years thereafter</i>). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).																				
Statistical/Administrative Information <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY																				
Estimated Number of Creditors <table style="width: 100%; text-align: center;"> <tr> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>1-49</td> <td>50-99</td> <td>100-199</td> <td>200-999</td> <td>1,000-5,000</td> <td>5,001-10,000</td> <td>10,001-25,000</td> <td>25,001-50,000</td> <td>50,001-100,000</td> <td>Over 100,000</td> </tr> </table>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1-49	50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	Over 100,000	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													
1-49	50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	Over 100,000													
Estimated Assets <table style="width: 100%; text-align: center;"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> <td>\$10,000,001 to \$50 million</td> <td>\$50,000,001 to \$100 million</td> <td>\$100,000,001 to \$500 million</td> <td>\$500,000,001 to \$1 billion</td> <td>More than \$1 billion</td> </tr> </table>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													
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Estimated Liabilities <table style="width: 100%; text-align: center;"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> <td>\$10,000,001 to \$50 million</td> <td>\$50,000,001 to \$100 million</td> <td>\$100,000,001 to \$500 million</td> <td>\$500,000,001 to \$1 billion</td> <td>More than \$1 billion</td> </tr> </table>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													
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Voluntary Petition <i>(This page must be completed and filed in every case.)</i>		Name of Debtor(s): Ronald J. Reyes, Sr. Liza A. Reyes
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet.)		
Location Where Filed: Western District of Texas	Case Number: 03 55503 C	Date Filed: 10/3/2003
Location Where Filed:	Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet.)		
Name of Debtor:	Case Number:	Date Filed:
District:	Relationship:	Judge:
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)		Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).
<input type="checkbox"/> Exhibit A is attached and made a part of this petition.		X _____ Date
Exhibit C		
Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?		
<input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No.		
Exhibit D		
(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)		
<input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.		
If this is a joint petition:		
<input checked="" type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.		
Information Regarding the Debtor - Venue (Check any applicable box.)		
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.		
Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.)		
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)		
(Name of landlord that obtained judgment)		
(Address of landlord)		
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).		

Voluntary Petition <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): Ronald J. Reyes, Sr. Liza A. Reyes
Signatures		
Signature(s) of Debtor(s) (Individual/Joint) <p>I declare under penalty of perjury that the information provided in this petition is true and correct. <input type="checkbox"/> [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. <input type="checkbox"/> [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X <u>/s/ Ronald J. Reyes, Sr.</u> Ronald J. Reyes, Sr.</p> <p>X <u>/s/ Liza A. Reyes</u> Liza A. Reyes</p> <p>Telephone Number (If not represented by attorney) <u>06/24/2010</u> Date</p>		Signature of a Foreign Representative <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.</p> <p>(Check only one box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.</p> <p><input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p>X _____ (Signature of Foreign Representative) (Printed Name of Foreign Representative)</p> <p>Date</p>
Signature of Attorney* <p>X <u>/s/ Callan M. Billingsley</u> Callan M. Billingsley Bar No. 02316200</p> <p>Law Office of Callan M. Billingsley 909 N.E. Loop 410, Suite 300 San Antonio, TX 78209</p> <p>Phone No. (210) 841-5688 Fax No. (210) 822-3300 06/24/2010 Date</p> <p>*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.</p>		Signature of Non-Attorney Bankruptcy Petition Preparer <p>I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.</p> <p>Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)</p> <p>Address X _____</p> <p>Date Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.</p> <p>Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><i>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.</i></p>
<p>Signature of Authorized Individual Printed Name of Authorized Individual Title of Authorized Individual Date</p>		

B 1D (Official Form 1, Exhibit D) (12/09) **UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION**

In re: **Ronald J. Reyes, Sr.**
Liza A. Reyes

Case No. _____
(if known)

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*
2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

B 1D (Official Form 1, Exhibit D) (12/09) **UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION**

In re: **Ronald J. Reyes, Sr.**
Liza A. Reyes

Case No. _____
(if known)

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Continuation Sheet No. 1

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*
- Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
- Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
- Active military duty in a military combat zone.
5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Ronald J. Reyes, Sr.
Ronald J. Reyes, Sr.

Date: 06/24/2010

B 1D (Official Form 1, Exhibit D) (12/09) **UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION**

In re: **Ronald J. Reyes, Sr.**
Liza A. Reyes

Case No. _____
(if known)

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

B 1D (Official Form 1, Exhibit D) (12/09) **UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION**

In re: **Ronald J. Reyes, Sr.**
Liza A. Reyes

Case No. _____

(if known)

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Continuation Sheet No. 1

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Liza A. Reyes
Liza A. Reyes

Date: 06/24/2010

B6A (Official Form 6A) (12/07)

In re **Ronald J. Reyes, Sr.**
Liza A. ReyesCase No. _____
(if known)**SCHEDULE A - REAL PROPERTY**

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting Any Secured Claim or Exemption	Amount Of Secured Claim
2918 E. Houston St., San Antonio, Texas undivided 1/7th interest in property located at 2918 E. Houston St., San Antonio, Texas	undivided interest	C	\$2,108.00	\$0.00
218 Northill, San Antonio, TX 78205	fee simple	J	\$79,260.00	\$92,880.00
			Total: \$81,368.00	(Report also on Summary of Schedules)

In re **Ronald J. Reyes, Sr.**
Liza A. Reyes

Case No. _____

(if known)

SCHEDULE B - PERSONAL PROPERTY

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
1. Cash on hand.	X			
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X	deposit accounts	C	\$10,000.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video and computer equipment.	X	household goods and furnishings	C	\$15,000.00
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		wearing apparel	C	\$600.00
7. Furs and jewelry.		jewelry	C	\$4,500.00
8. Firearms and sports, photographic, and other hobby equipment.		two firearms (.223 rifle and .22 pistol) two firearms (pistols) sports and hobby equipment	C C C	\$2,600.00 \$450.00 \$200.00

B6B (Official Form 6B) (12/07) -- Cont.

In re **Ronald J. Reyes, Sr.**
Liza A. Reyes

Case No. _____

(if known)

SCHEDULE B - PERSONAL PROPERTY*Continuation Sheet No. 1*

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X	life insurance	C	\$0.00
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X	I Legend Realty LLC	C	\$0.00
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			

B6B (Official Form 6B) (12/07) -- Cont.

In re **Ronald J. Reyes, Sr.**
Liza A. ReyesCase No. _____
(if known)**SCHEDULE B - PERSONAL PROPERTY***Continuation Sheet No. 2*

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.		disputed real estate commission	C	\$9,500.00
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.		medical malpractice claim	C	\$0.00
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.		Texas Real Estate Sales license and Texas Real Estate Broker's license	C	\$0.00
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			

B6B (Official Form 6B) (12/07) -- Cont.

In re **Ronald J. Reyes, Sr.**
Liza A. Reyes

Case No. _____
(if known)

SCHEDULE B - PERSONAL PROPERTY

Continuation Sheet No. 3

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2008 Toyota Tundra	C	\$22,000.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.		office equipment	C	\$3,000.00
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.		household pets	C	\$300.00
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			

In re **Ronald J. Reyes, Sr.**
Liza A. ReyesCase No. _____
(If known)**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**Debtor claims the exemptions to which debtor is entitled under:
(Check one box) Check if debtor claims a homestead exemption that exceeds
\$146,450.*

- 11 U.S.C. § 522(b)(2)
 11 U.S.C. § 522(b)(3)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
2918 E. Houston St., San Antonio, Texas undivided 1/7th interest in property located at 2918 E. Houston St., San Antonio, Texas	11 U.S.C. § 522(d)(5)	\$2,108.00	\$2,108.00
218 Northill, San Antonio, TX 78205	11 U.S.C. § 522(d)(5)	\$0.00	\$79,260.00
deposit accounts	11 U.S.C. § 522(d)(5)	\$10,000.00	\$10,000.00
household goods and furnishings	11 U.S.C. § 522(d)(3)	\$15,000.00	\$15,000.00
wearing apparel	11 U.S.C. § 522(d)(3)	\$600.00	\$600.00
jewelry	11 U.S.C. § 522(d)(4) 11 U.S.C. § 522(d)(5)	\$2,900.00 \$1,600.00	\$4,500.00
two firearms (.223 rifle and .22 pistol)	11 U.S.C. § 522(d)(5)	\$2,600.00	\$2,600.00
two firearms (pistols)	11 U.S.C. § 522(d)(5)	\$450.00	\$450.00
sports and hobby equipment	11 U.S.C. § 522(d)(5)	\$200.00	\$200.00
life insurance	11 U.S.C. § 522(d)(7) 11 U.S.C. § 522(d)(8)	100% \$0.00	\$0.00
disputed real estate commission	11 U.S.C. § 522(d)(5)	\$6,992.00	\$9,500.00
medical malpractice claim	11 U.S.C. § 522(d)(11)(D) 11 U.S.C. § 522(d)(11)(E)	\$0.00 100%	\$0.00
2008 Toyota Tundra	11 U.S.C. § 522(d)(2)	\$0.00	\$22,000.00
* Amount subject to adjustment on 4/1/13 and every three years thereafter with respect to cases commenced on or after the date of adjustment.		\$42,450.00	\$146,218.00

B6C (Official Form 6C) (4/10) -- Cont.

**In re Ronald J. Reyes, Sr.
Liza A. Reyes**

Case No. _____
(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Continuation Sheet No. 1

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
office equipment	11 U.S.C. § 522(d)(6)	\$0.00	\$3,000.00
household pets	11 U.S.C. § 522(d)(3)	\$300.00	\$300.00
		\$42,750.00	\$149,518.00

B6D (Official Form 6D) (12/07)

In re **Ronald J. Reyes, Sr.**
Liza A. ReyesCase No. _____
(if known)**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS** Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCT #:							
Accion Texas P.O. Box 915222 Dallas, TX 75391-5222	J	DATE INCURRED: NATURE OF LIEN: loan COLLATERAL: equipment REMARKS:				\$7,151.00	\$4,651.00
ACCT #:							
Chase Home Finance LLC Bankruptcy Department 3415 Vision Drive Columbus, OH 43219-6009	J	DATE INCURRED: NATURE OF LIEN: deed of trust COLLATERAL: 218 Northill, San Antonio, TX 78205 REMARKS:				\$25,000.00	
ACCT #: 7025							
Sylvia Romo, RTA P.O. Box 839950 San Antonio, TX 78283-3950	J	DATE INCURRED: NATURE OF LIEN: ad valorem taxes COLLATERAL: personal property REMARKS:				\$1,250.00	
ACCT #: 4187							
Toyota Financial Services P.O. Box 8026 Cedar Rapids, IA 52409-8026	J	DATE INCURRED: NATURE OF LIEN: purchase money COLLATERAL: 2008 Toyota Tundra REMARKS:				\$20,106.00	
Subtotal (Total of this Page) >						\$53,507.00	\$4,651.00
Total (Use only on last page) >						\$53,507.00	\$4,651.00

No _____ continuation sheets attached

(Report also on
Summary of
Schedules.) (If applicable,
report also on
Statistical
Summary of
Certain Liabilities
and Related
Data.)

B6E (Official Form 6E) (04/10)

In re **Ronald J. Reyes, Sr.**
Liza A. ReyesCase No. _____
(If Known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS** Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.) **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

 Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

 Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

 Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

 Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

 Deposits by individuals

Claims of individuals up to \$2,600* for deposits for the purchase, lease or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

 Taxes and Certain Other Debts Owed to Governmental Units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

 Commitments to Maintain the Capital of an Insured Depository Institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

 Claims for Death or Personal Injury While Debtor Was Intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

 Administrative allowances under 11 U.S.C. Sec. 330

Claims based on services rendered by the trustee, examiner, professional person, or attorney and by any paraprofessional person employed by such person as approved by the court and/or in accordance with 11 U.S.C. §§ 326, 328, 329 and 330.

* Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (04/10) - Cont.

In re **Ronald J. Reyes, Sr.**
Liza A. ReyesCase No. _____
(If Known)**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

TYPE OF PRIORITY	Administrative allowances		
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CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCT #:							
Callan M. Billingsley 909 N.E. Loop 410, Suite 300 San Antonio, TX 78209	J	DATE INCURRED: CONSIDERATION: attorney's fees for this case REMARKS:			\$3,500.00	\$3,500.00	\$0.00

Sheet no. 1 of 1 continuation sheets
attached to Schedule of Creditors Holding Priority Claims

Subtotals (Totals of this page) >

Total >

(Use only on last page of the completed Schedule E.
Report also on the Summary of Schedules.)

Totals >

(Use only on last page of the completed Schedule E.
If applicable, report also on the Statistical Summary
of Certain Liabilities and Related Data.)

\$3,500.00	\$3,500.00	\$0.00
\$3,500.00		
	\$3,500.00	\$0.00

B6F (Official Form 6F) (12/07)
 In re **Ronald J. Reyes, Sr.**
Liza A. Reyes

Case No. _____
 (if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: Adams & Flake, Inc. 1001 Pat Booker Road, Suite 200 Universal City, TX 78148 Attn: Harry B. Adams, III	J	DATE INCURRED: CONSIDERATION: attorney for McCombs Family, LTD. REMARKS:				\$0.00
ACCT #: Aladdin Cleaning & Restoration, Inc. 315 West Josephine San Antonio, TX 78212	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$550.00
ACCT #: 323.0 Alamo ENT Associates, PA P.O. Box 2679 San Antonio, TX 78229	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$36.00
ACCT #: 7841 All Weather Air 4254 Gate Crest San Antonio, TX 78217	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$571.00
ACCT #: 0948 American Medical Collection Agency 2269 South Saw Mill River Road Building 3 Elmsford, NY 10523	J	DATE INCURRED: CONSIDERATION: collecting for Clinical Pathology REMARKS:				\$0.00
ACCT #: 0001 AT&T P.O. Box 630052 Dallas, TX 75263-0052	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$617.00
Subtotal >						\$1,774.00
Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

B6F (Official Form 6F) (12/07) - Cont.

In re **Ronald J. Reyes, Sr.**
Liza A. ReyesCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: Bauvi Investments 19141 Stone Oak Parkway, Suite 104-153 San Antonio, TX 78258 Attn: Gonzalo Bautista, Sr.	J	DATE INCURRED: CONSIDERATION: loan REMARKS:		X		\$75,000.00
ACCT #: 1866 Biehl & Biehl, Inc. 325 E. Fullerton Ave. Carol Stream, IL 60188	J	DATE INCURRED: CONSIDERATION: collecting for SAEN REMARKS:				\$0.00
ACCT #: Bill Embrey Heating and Air Conditioning Co. P.O. Box 14098 San Antonio, TX 78214	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$375.00
ACCT #: 6410, 1414 & 7114 Business and Professional Service 621 N. Alamo San Antonio, TX 78215	J	DATE INCURRED: CONSIDERATION: three collection accounts REMARKS:				\$0.00
ACCT #: 9235 Capital One P.O. Box 30285 Salt Lake City, UT 84130-0285	J	DATE INCURRED: CONSIDERATION: credit card REMARKS:				\$632.00
ACCT #: 8061 Cardiology Clinic of San Antonio P.O. Box 119 San Antonio, TX 78291-0119	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$1,044.00
Sheet no. <u>1</u> of <u>10</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal >			\$77,051.00
			Total >			
			(Use only on last page of the completed Schedule F.)			
			(Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)			

B6F (Official Form 6F) (12/07) - Cont.

In re **Ronald J. Reyes, Sr.**
Liza A. ReyesCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: 2273 Cardiology Clinic of San Antonio, PA 4411 Medical Drive, No. 300 San Antonio, TX 78229	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$145.00
ACCT #: 4352 Central Womens Health Care 1200 Brooklyn Ave., #220 San Antonio, TX 78212	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$30.00
ACCT #: 0948 Clinical Pathology Laboratories P.O. Box 141699 Austin, TX 78714-1699	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$218.00
ACCT #: 3573 Datasearch, Inc. P.O. Box 461289 San Antonio, TX 78246-1289	J	DATE INCURRED: CONSIDERATION: collecting for Rivercity Em. Phys. REMARKS:				\$0.00
ACCT #: 3844 DCOA Physician Associates PA 11321 Fallbrook Drive Houston, TX 77065-4232	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$290.00
ACCT #: 6294 Dell Financial Services c/o DFS Customer Care Dept. P.O. Box 81577 Austin, TX 78708-1577	J	DATE INCURRED: CONSIDERATION: account REMARKS:				\$6,057.00
Sheet no. <u>2</u> of <u>10</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal >			\$6,740.00
			Total >			
			(Use only on last page of the completed Schedule F.)			
			(Report also on Summary of Schedules and, if applicable, on the			
			Statistical Summary of Certain Liabilities and Related Data.)			

B6F (Official Form 6F) (12/07) - Cont.

In re **Ronald J. Reyes, Sr.**
Liza A. ReyesCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: ERA Franchise Systems, Inc. 1 Campus Drive Parsippany, NJ 07054	J	DATE INCURRED: 113452 CONSIDERATION: services REMARKS:				\$98,067.00
ACCT #: Gordon & Rees LLP Attorneys at Law 18 Columbia Turnpike, Suite 220 Florham Park, NJ 07932	J	DATE INCURRED: CONSIDERATION: attorney for ERA Franchise Systems LLC REMARKS:				\$0.00
ACCT #: 9566 Greater SA ER Physicians PA 8401 Datapoint Suite 500 San Antonio, TX 78229-5907	J	DATE INCURRED: CONSIDERATION: account REMARKS:				\$255.00
ACCT #: 8078 Home Depot Credit Services P.O. Box 9122 Des Moines, IA 50368-9122	J	DATE INCURRED: CONSIDERATION: account REMARKS:				\$734.00
ACCT #: 2818 HSBC P.O. Box 60167 City of Industry, CA 91716-0167	J	DATE INCURRED: CONSIDERATION: credit card REMARKS:				\$1,032.00
ACCT #: 3773 HSBC Business Solutions P.O. Box 4160 Carol Stream, IL 60197-4160	J	DATE INCURRED: CONSIDERATION: account REMARKS:				\$2,800.00
Sheet no. <u>3</u> of <u>10</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal >			\$102,888.00
			Total >			
			(Use only on last page of the completed Schedule F.)			
			(Report also on Summary of Schedules and, if applicable, on the			
			Statistical Summary of Certain Liabilities and Related Data.)			

B6F (Official Form 6F) (12/07) - Cont.

In re **Ronald J. Reyes, Sr.**
Liza A. ReyesCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: 6579 HSBC Card Services P.O. Box 80084 Salinas, CA 93912-0084	J	DATE INCURRED: CONSIDERATION: credit card REMARKS:				\$66.00
ACCT #: 2818 HSBC Card Services P.O. Box 80084 Salinas, CA 93912-0084	J	DATE INCURRED: CONSIDERATION: Orchard Bank REMARKS:				\$417.00
ACCT #: 9489 I.C. System, Inc. 444 Highway 96 East P.O. Box 64886 Saint Paul, MN 55164-0886	J	DATE INCURRED: CONSIDERATION: collecting for IPC of Texas REMARKS:				\$94.00
ACCT #: 4189 I.C. System, Inc. 444 Highway 96 East P.O. Box 64378 Saint Paul, MN 55164-0886	J	DATE INCURRED: CONSIDERATION: collecting for TSAOG REMARKS:				\$0.00
ACCT #: Internal Revenue Service P.O. Box 21126 Philadelphia, PA 19114-0326	J	DATE INCURRED: CONSIDERATION: notice REMARKS:				\$0.00
ACCT #: Internal Revenue Service Insolvency II 300 E. 8th Street Stop 5026 AUS Austin, TX 78701	J	DATE INCURRED: CONSIDERATION: notice REMARKS:				\$0.00
Sheet no. <u>4</u> of <u>10</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal >			\$577.00
			Total >			
			(Use only on last page of the completed Schedule F.)			
			(Report also on Summary of Schedules and, if applicable, on the			
			Statistical Summary of Certain Liabilities and Related Data.)			

B6F (Official Form 6F) (12/07) - Cont.

In re **Ronald J. Reyes, Sr.**
Liza A. ReyesCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: James M. Andry, MD 5290 Medical Dr. San Antonio, TX 78229-4849	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$1,464.00
ACCT #: John R. Lane, Jr. Lane & Associates 8526 N. New Braunfels San Antonio, TX 78217	J	DATE INCURRED: CONSIDERATION: attorney for Investron REMARKS:				\$140,500.00
ACCT #: 1483 Laboratory Corporation of America P.O. Box 2240 Burlington, NC 27216-2240	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$71.00
ACCT #: Law Office of Edward M. Lavin 8918 Tesoro Drive, Suite 418 San Antonio, TX 78217	J	DATE INCURRED: CONSIDERATION: attorney's fees REMARKS:				\$8,071.00
ACCT #: Linebarger Goggan Blair & Sampson, LLP 711 Navarro, Suite 300 San Antonio, TX 78205	J	DATE INCURRED: CONSIDERATION: attorney for Sylvia Romo REMARKS:				\$0.00
ACCT #: Linebarger Goggan Blair & Sampson, LLP 711 Navarro, Suite 300 San Antonio, TX 78205 Attn: Donald P. Stecker	J	DATE INCURRED: CONSIDERATION: Attorney for Sylvia Romo REMARKS:				\$0.00
Sheet no. <u>5</u> of <u>10</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal >			\$150,106.00
			Total >			
			(Use only on last page of the completed Schedule F.)			
			(Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)			

B6F (Official Form 6F) (12/07) - Cont.

In re **Ronald J. Reyes, Sr.**
Liza A. ReyesCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: 4191 Lisa Davis, MD 520 Camden San Antonio, TX 78215	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$22.00
ACCT #: 5781 Lowe's P.O. Box 2918 Mission, KS 66201	J	DATE INCURRED: CONSIDERATION: account REMARKS:				\$772.00
ACCT #: Mary Ann B. Miklas, LCSW 19206 Huebner Road, Suite 104 San Antonio, TX 78258	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$110.00
ACCT #: 8488 Methodist Ambulatory Surgery Hospital NW P.O. Box 2098 San Antonio, TX 78297	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$277.00
ACCT #: 6900 Methodist Stone Oak Hospital P.O. Box 99400 Louisville, KY 40269	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$1,558.00
ACCT #: H986 NCO Financial Systems, Inc. 507 Prudential Road Horsham, PA 19044	J	DATE INCURRED: CONSIDERATION: collecting for Capital One REMARKS:				\$0.00
Sheet no. <u>6</u> of <u>10</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal >			\$2,739.00
			Total >			
			(Use only on last page of the completed Schedule F.)			
			(Report also on Summary of Schedules and, if applicable, on the			
			Statistical Summary of Certain Liabilities and Related Data.)			

B6F (Official Form 6F) (12/07) - Cont.

In re **Ronald J. Reyes, Sr.**
Liza A. ReyesCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: ER01 Ortho Plus Inc. P.O. Box 690633 San Antonio, TX 78269-0633	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$746.00
ACCT #: 9179 Pinnacle Anesthesia Consultants 13601 Preston Rd., Suite 1000W Dallas, TX 75240-4911	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$3,218.00
ACCT #: 6721 Premium Financial Specialists, Inc. P.O. Box 6580 Chelmsford, MA 01824-0980	J	DATE INCURRED: CONSIDERATION: account REMARKS:				\$596.00
ACCT #: Quiroz Adult Medicine Clinic PA 155 E. Sonterra Boulevard Suite 111 San Antonio, TX 78258	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$73.00
ACCT #: R.L. "Trey" Wilson, Esq. 1202 W. Bitters, Bldg. 1 Suite 1204 San Antonio, TX 78216	J	DATE INCURRED: CONSIDERATION: attorney for Josie Jones REMARKS:				\$0.00
ACCT #: 7424 River City Emergency Phys P.O. Box 298 San Antonio, TX 78291	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$722.00
Sheet no. <u>7</u> of <u>10</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal >			\$5,355.00
			Total >			
			(Use only on last page of the completed Schedule F.)			
			(Report also on Summary of Schedules and, if applicable, on the			
			Statistical Summary of Certain Liabilities and Related Data.)			

B6F (Official Form 6F) (12/07) - Cont.

In re **Ronald J. Reyes, Sr.**
Liza A. ReyesCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: RJM Acquisitions, LLC 575 Underhill Blvd., Suite 224 Syosset, NY 11791	J	DATE INCURRED: CONSIDERATION: collecting for Literary Guild REMARKS:				\$0.00
ACCT #: Robert N. Ray Attorney at Law 4502 Centerview, Suite 200 San Antonio, TX 78228-1317	J	DATE INCURRED: CONSIDERATION: notice REMARKS:				\$0.00
ACCT #: San Antonio Express News P.O. Box 2171 San Antonio, TX 78297-2171	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$1,285.00
ACCT #: 0409 Southwest Texas Publishing, Inc. 6531 FM 78, Suite 110-481 San Antonio, TX 78244	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$2,995.00
ACCT #: 0609 Specialized Collection Systems, Inc. P.O. Box 441508 Houston, TX 77244-1508	J	DATE INCURRED: CONSIDERATION: collecting for M&S Radiology REMARKS:				\$0.00
ACCT #: 6028 Sprint P.O. Box 172408 Denver, CO 80217-2408 Attn: Bankruptcy	J	DATE INCURRED: CONSIDERATION: account REMARKS:				\$1,181.00
Sheet no. 8 of 10 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal >			\$5,461.00
			Total >			
			(Use only on last page of the completed Schedule F.)			
			(Report also on Summary of Schedules and, if applicable, on the			
			Statistical Summary of Certain Liabilities and Related Data.)			

B6F (Official Form 6F) (12/07) - Cont.

In re **Ronald J. Reyes, Sr.**
Liza A. ReyesCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: 9179 Synerprise Consulting Services, Inc. 2809 Regal Road, Suite 107 Plano, TX 75075	J	DATE INCURRED: CONSIDERATION: collecting for Pinnacle Anesthesia REMARKS:				\$0.00
ACCT #: 6A94 and 1A94 The San Antonio Orthopaedic Group 84 N.E. Loop 410, Suite 184 San Antonio, TX 78216	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$2,396.00
ACCT #: 6A94 The San Antonio Orthopaedic Group 84 NE Loop 410, Suite 184 San Antonio, TX 78216	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$933.00
ACCT #: 1A94 The San Antonio Orthopaedic Group 84 NE Loop 410, Suite 184 San Antonio, TX 78216	J	DATE INCURRED: CONSIDERATION: services REMARKS:				\$502.00
ACCT #: United States Attorney 601 N.W. Loop 410, Suite 600 San Antonio, Texas 78216	J	DATE INCURRED: CONSIDERATION: notice REMARKS:				\$0.00
ACCT #: United States Trustee P.O. Box 1539 San Antonio, TX 78295-1539	J	DATE INCURRED: CONSIDERATION: notice REMARKS:				\$0.00
Sheet no. <u>9</u> of <u>10</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal >			\$3,831.00
			Total >			
			(Use only on last page of the completed Schedule F.)			
			(Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)			

B6F (Official Form 6F) (12/07) - Cont.

In re **Ronald J. Reyes, Sr.**
Liza A. ReyesCase No. _____
(if known)**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: Warren, Drugan & Barrows, P.C. 800 Broadway San Antonio, TX 78215	J	DATE INCURRED: CONSIDERATION: attorney for CCC REMARKS:				\$0.00
ACCT #: 1666 West Asset Management, Inc. 2703 N. Highway 75 Sherman, TX 75090	J	DATE INCURRED: CONSIDERATION: collecting for Methodist Hospital REMARKS:				\$0.00
ACCT #: 8720 West Asset Management, Inc. 2703 N. Highway 75 Sherman, TX 75090	J	DATE INCURRED: CONSIDERATION: collecting for Methodist Hospital REMARKS:				\$0.00
ACCT #: 1666 West Asset Management, Inc. 2703 N. Highway 75 Sherman, TX 75090	J	DATE INCURRED: CONSIDERATION: collecting for Methodist Ambulatory REMARKS:				\$0.00
Sheet no. 10 of 10 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal >			\$0.00
			Total >			\$356,522.00
			(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)			

B6G (Official Form 6G) (12/07)

In re **Ronald J. Reyes, Sr.**
Liza A. Reyes

Case No. _____

(if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases of contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
Robert Gonzalez 218 Northill San Antonio, TX 78201	contract for deed - Debtors are selling property located at 218 Northill, San Antonio, TX 78205. Contract to be ASSUMED

B6H (Official Form 6H) (12/07)

In re **Ronald J. Reyes, Sr.**
Liza A. Reyes

Case No. _____

(if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

 Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

B6I (Official Form 6I) (12/07)

In re **Ronald J. Reyes, Sr.**
Liza A. ReyesCase No. _____
(if known)**SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status: Married	Dependents of Debtor and Spouse			
	Relationship(s):	Age(s):	Relationship(s):	Age(s):
Employment:	Debtor		Spouse	
Occupation	Realtor		Realtor	
Name of Employer	self		self	
How Long Employed	20 years		25 years	
Address of Employer	San Antonio, Texas		San Antonio, Texas	

INCOME: (Estimate of average or projected monthly income at time case filed)

	DEBTOR	SPOUSE
1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly)	\$0.00	\$0.00
2. Estimate monthly overtime	\$0.00	\$0.00
3. SUBTOTAL	\$0.00	\$0.00
4. LESS PAYROLL DEDUCTIONS		
a. Payroll taxes (includes social security tax if b. is zero)	\$0.00	\$0.00
b. Social Security Tax	\$0.00	\$0.00
c. Medicare	\$0.00	\$0.00
d. Insurance	\$0.00	\$0.00
e. Union dues	\$0.00	\$0.00
f. Retirement	\$0.00	\$0.00
g. Other (Specify) _____	\$0.00	\$0.00
h. Other (Specify) _____	\$0.00	\$0.00
i. Other (Specify) _____	\$0.00	\$0.00
j. Other (Specify) _____	\$0.00	\$0.00
k. Other (Specify) _____	\$0.00	\$0.00
5. SUBTOTAL OF PAYROLL DEDUCTIONS	\$0.00	\$0.00
6. TOTAL NET MONTHLY TAKE HOME PAY	\$0.00	\$0.00
7. Regular income from operation of business or profession or farm (Attach detailed stmt)	\$14,000.00	\$0.00
8. Income from real property	\$1,000.00	\$750.00
9. Interest and dividends	\$0.00	\$0.00
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above	\$0.00	\$0.00
11. Social security or government assistance (Specify): _____	\$0.00	\$0.00
12. Pension or retirement income	\$0.00	\$0.00
13. Other monthly income (Specify): a. _____ b. _____ c. _____	\$0.00	\$0.00
14. SUBTOTAL OF LINES 7 THROUGH 13	\$15,000.00	\$750.00
15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)	\$15,000.00	\$750.00
16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15)	\$15,750.00	

(Report also on Summary of Schedules and, if applicable,
on Statistical Summary of Certain Liabilities and Related Data)17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:
None.

B6J (Official Form B6J) (12/07)

IN RE: **Ronald J. Reyes, Sr.**
Liza A. ReyesCase No. _____
(if known)**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$1,710.00
a. Are real estate taxes included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
b. Is property insurance included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
2. Utilities: a. Electricity and heating fuel b. Water and sewer c. Telephone d. Other: cable & internet	\$300.00 \$90.00 \$250.00
3. Home maintenance (repairs and upkeep)	\$100.00
4. Food	\$550.00
5. Clothing	\$125.00
6. Laundry and dry cleaning	\$125.00
7. Medical and dental expenses	\$350.00
8. Transportation (not including car payments)	\$500.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$100.00
10. Charitable contributions	\$200.00
11. Insurance (not deducted from wages or included in home mortgage payments) a. Homeowner's or renter's b. Life c. Health d. Auto e. Other:	\$127.00 \$50.00 \$1,087.00 \$385.00
12. Taxes (not deducted from wages or included in home mortgage payments) Specify:	
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) a. Auto: b. Other: student loan c. Other: Chase d. Other:	\$100.00 \$653.00
14. Alimony, maintenance, and support paid to others:	
15. Payments for support of add'l dependents not living at your home:	
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$7,528.00
17.a. Other: See attached personal expenses	\$420.00
17.b. Other:	
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$14,750.00
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document: None.	
20. STATEMENT OF MONTHLY NET INCOME a. Average monthly income from Line 15 of Schedule I b. Average monthly expenses from Line 18 above c. Monthly net income (a. minus b.)	\$15,750.00 \$14,750.00 \$1,000.00

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION**

IN RE: **Ronald J. Reyes, Sr.**
Liza A. Reyes

CASE NO

CHAPTER **13**

EXHIBIT TO SCHEDULE J

Itemized Business Expenses

Expense	Category	Amount
rent		\$2,500.00
phone and internet		\$350.00
salary		\$2,000.00
lease of copier		\$350.00
phone system		\$300.00
insurance		\$20.00
advertises		\$400.00
web page		\$100.00
cell phones		\$350.00
dues		\$167.00
self-employment taxes		\$991.00
Total >		\$7,528.00

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION**

IN RE: **Ronald J. Reyes, Sr.**
Liza A. Reyes

CASE NO

CHAPTER **13**

EXHIBIT TO SCHEDULE J

Continuation Sheet No. 1

Itemized Personal Expenses

Expense	Amount
garbage collection	\$35.00
miscellaneous	\$165.00
personal care	\$70.00
animal care	\$150.00
Total >	\$420.00

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION**

In re **Ronald J. Reyes, Sr.**
Liza A. Reyes

Case No.

Chapter **13**

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$81,368.00		
B - Personal Property	Yes	4	\$68,150.00		
C - Property Claimed as Exempt	Yes	2			
D - Creditors Holding Secured Claims	Yes	1		\$53,507.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		\$3,500.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	11		\$356,522.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			\$15,750.00
J - Current Expenditures of Individual Debtor(s)	Yes	3			\$14,750.00
TOTAL		27	\$149,518.00	\$413,529.00	

Form 6 - Statistical Summary (12/07)

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION**

In re **Ronald J. Reyes, Sr.**
Liza A. Reyes

Case No.

Chapter **13**

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11, or 13, you must report all information requested below.

- Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	
Student Loan Obligations (from Schedule F)	
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	
TOTAL	

State the following:

Average Income (from Schedule I, Line 16)	
Average Expenses (from Schedule J, Line 18)	
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.		
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		
4. Total from Schedule F		
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		

B6 Declaration (Official Form 6 - Declaration) (12/07)

In re **Ronald J. Reyes, Sr.**

Liza A. Reyes

Case No. _____

(if known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES
DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date 06/24/2010

Signature /s/ Ronald J. Reyes, Sr.
Ronald J. Reyes, Sr.

Date 06/24/2010

Signature /s/ Liza A. Reyes
Liza A. Reyes

[If joint case, both spouses must sign.]

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION**

In re: **Ronald J. Reyes, Sr.**
Liza A. Reyes

Case No. _____

(if known)

STATEMENT OF FINANCIAL AFFAIRS

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$39,132.	estimated 2010 YTD income

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

3. Payments to creditors

Complete a. or b., as appropriate, and c.

None

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
Chase Home Finance LLC Bankruptcy Department 3415 Vision Drive Columbus, OH 43219-6009	monthly	\$653. per month	\$25,000.00
Security Service FCU 16211 La Cantera Parkway San Antonio, TX 78256-2419	monthly	\$618. per month	\$11,124.

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

* Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

None

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION**

In re: **Ronald J. Reyes, Sr.
Liza A. Reyes**

Case No. _____

(if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 1

4. Suits and administrative proceedings, executions, garnishments and attachments

- None a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
ERA Franchise Systems, LLC v. Liza Reyes, Ronald Reyes, et al.	civil action	Superior Court of New Jersey Law Division: Morris County	pending
Josie Jones v. Liza A. Reyes and Ronald J. Reyes (Cause No. 2008 CI 17147)	civil suit	150th District Court of Bexar County, Texas	judgment rendered against Debtors
McCombs Family, LTD d/b/a Highpoint Shopping Center v. Liza A Reyes d/b/a Legend Realty (Cause No. 2008 CI 11666)	civil collection suit	73rd District Court of Bexar County, Texas	pending
Investron, Ltd. v. Ronald Reyes and Liza Reyes (Cause No. 2009 CI 07666)	civil collection suit	407th District Court of Bexar County, Texas	judgment rendered against Debtors

- None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

5. Repossessions, foreclosures and returns

- None List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

6. Assignments and receiverships

- None a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

- None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION**

In re: **Ronald J. Reyes, Sr.**
Liza A. Reyes

Case No. _____

(if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 2

7. Gifts

- None List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
Debtor's church		monthly	\$200. per month

8. Losses

- None List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

9. Payments related to debt counseling or bankruptcy

- None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Callan M. Billingsley 909 N.E. Loop 410, Suite 300 San Antonio, TX 78209	05/09/2010	\$1,000.00

10. Other transfers

- None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

- None b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

11. Closed financial accounts

- None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

12. Safe deposit boxes

- None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION**

In re: **Ronald J. Reyes, Sr.**
Liza A. Reyes

Case No. _____

(if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 3

13. Setoffs

- None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

- None List all property owned by another person that the debtor holds or controls.

DESCRIPTION AND VALUE

NAME AND ADDRESS OF OWNER

OF PROPERTY

LOCATION OF PROPERTY

son

1999 Ford pickup - value of

son's possession

\$1,000.

15. Prior address of debtor

- None If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

16. Spouses and Former Spouses

- None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

Debtors are married to each other.

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

- None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

- None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

- None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION**

In re: **Ronald J. Reyes, Sr.**
Liza A. Reyes

Case No. _____

(if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 4

18. Nature, location and name of business

None

- a. If the debtor is an individual, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

NAME, ADDRESS, AND LAST FOUR DIGITS OF

SOCIAL-SECURITY OR OTHER INDIVIDUAL

TAXPAYER-I.D. NO. (ITIN) / COMPLETE EIN

NATURE OF BUSINESS

BEGINNING AND ENDING

DATES

I Legend Realty LLC
8131 W. IH 10, Ste 105
San Antonio, Texas 78230

real estate sales

October 19, 2005

**Legend Realty Property Management (a sole
proprietorship)**

ERA Legend Realty (a sole proprietorship)

None

- b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

- a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

None

- b. List all firms or individuals who within two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

None

- c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION**

In re: **Ronald J. Reyes, Sr.**
Liza A. Reyes

Case No. _____

(if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 5

- None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within two years immediately preceding the commencement of this case.

20. Inventories

- None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

- None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

21. Current Partners, Officers, Directors and Shareholders

- None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

- None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

22. Former partners, officers, directors and shareholders

- None a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case.

- None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

23. Withdrawals from a partnership or distributions by a corporation

- None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

24. Tax Consolidation Group

- None If the debtor is a corporation, list the name and federal taxpayer-identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

25. Pension Funds

- None If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION**

In re: **Ronald J. Reyes, Sr.**
Liza A. Reyes

Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 6

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date 06/24/2010

Signature /s/ Ronald J. Reyes, Sr.
of Debtor Ronald J. Reyes, Sr.

Date 06/24/2010

Signature /s/ Liza A. Reyes
of Joint Debtor Liza A. Reyes
(if any)

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both.

18 U.S.C. §§ 152 and 3571

UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION

IN RE: **Ronald J. Reyes, Sr.**
Liza A. Reyes

CASE NO

CHAPTER 13

DISCLOSURE OF COMPENSATION UNDER 11 U.S.C. § 329 AND B.R. 2016(B)

Amount paid:	\$1,000.00
Amount to be paid through the plan:	\$3,500.00
Amount to be paid outside the plan:	
Property transferred to attorney:	None
Collateral held by attorney:	None
Source of compensation:	debtors' income

I certify that I am the attorney for the above named debtor(s), and that the compensation paid or agreed to be paid to me for services rendered or to be rendered on behalf of the debtor(s) in, or in connection with, a case under Title 11 of the United States Code, such payment or agreement having been made after one year before the date of filing of the petition, is as indicated above. I further certify that I have not agreed to share this compensation with any person.

Date 06/24/2010

/s/ Ronald J. Reyes, Sr.
Ronald J. Reyes, Sr.

/s/ Callan M. Billingsley
Callan M. Billingsley

Bar No. **02316200**

/s/ Liza A. Reyes
Liza A. Reyes

UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION

IN RE: **Ronald J. Reyes, Sr.**
Liza A. Reyes

CASE NO

CHAPTER **13**

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 06/24/2010

Signature /s/ Ronald J. Reyes, Sr.
Ronald J. Reyes, Sr.

Date 06/24/2010

Signature /s/ Liza A. Reyes
Liza A. Reyes

Accion Texas
P.O. Box 915222
Dallas, TX 75391-5222

Adams & Flake, Inc.
1001 Pat Booker Road, Suite 200
Universal City, TX 78148
Attn: Harry B. Adams, III

Aladdin Cleaning & Restoration, Inc.
315 West Josephine
San Antonio, TX 78212

Alamo ENT Associates, PA
P.O. Box 2679
San Antonio, TX 78229

All Weather Air
4254 Gate Crest
San Antonio, TX 78217

American Medical Collection Agency
2269 South Saw Mill River Road
Building 3
Elmsford, NY 10523

AT&T
P.O. Box 630052
Dallas, TX 75263-0052

Bauvi Investments
19141 Stone Oak Parkway, Suite 104-153
San Antonio, TX 78258
Attn: Gonzalo Bautista, Sr.

Biehl & Biehl, Inc.
325 E. Fullerton Ave.
Carol Stream, IL 60188

Bill Embrey Heating and
Air Conditioning Co.
P.O. Box 14098
San Antonio, TX 78214

Business and Professional Service
621 N. Alamo
San Antonio, TX 78215

Capital One
P.O. Box 30285
Salt Lake City, UT 84130-0285

Cardiology Clinic of San Antonio
P.O. Box 119
San Antonio, TX 78291-0119

Cardiology Clinic of San Antonio, PA
4411 Medical Drive, No. 300
San Antonio, TX 78229

Central Womens Health Care
1200 Brooklyn Ave., #220
San Antonio, TX 78212

Chase Home Finance LLC
Bankruptcy Department
3415 Vision Drive
Columbus, OH 43219-6009

Clinical Pathology Laboratories
P.O. Box 141699
Austin, TX 78714-1699

Datasearch, Inc.
P.O. Box 461289
San Antonio, TX 78246-1289

DCOA Physician Associates PA
11321 Fallbrook Drive
Houston, TX 77065-4232

Dell Financial Services
c/o DFS Customer Care Dept.
P.O. Box 81577
Austin, TX 78708-1577

ERA Franchise Systems, Inc.
1 Campus Drive
Parsippany, NJ 07054

Gordon & Rees LLP
Attorneys at Law
18 Columbia Turnpike, Suite 220
Florham Park, NJ 07932

Greater SA ER Physicians PA
8401 Datapoint
Suite 500
San Antonio, TX 78229-5907

Home Depot Credit Services
P.O. Box 9122
Des Moines, IA 50368-9122

HSBC
P.O. Box 60167
City of Industry, CA 91716-0167

HSBC Business Solutions
P.O. Box 4160
Carol Stream, IL 60197-4160

HSBC Card Services
P.O. Box 80084
Salinas, CA 93912-0084

I.C. System, Inc.
444 Highway 96 East
P.O. Box 64886
Saint Paul, MN 55164-0886

I.C. System, Inc.
444 Highway 96 East
P.O. Box 64378
Saint Paul, MN 55164-0886

Internal Revenue Service
P.O. Box 21126
Philadelphia, PA 19114-0326

Internal Revenue Service
Insolvency II
300 E. 8th Street
Stop 5026 AUS
Austin, TX 78701

James M. Andry, MD
5290 Medical Dr.
San Antonio, TX 78229-4849

John R. Lane, Jr.
Lane & Associates
8526 N. New Braunfels
San Antonio, TX 78217

Laboratory Corporation of America
P.O. Box 2240
Burlington, NC 27216-2240

Law Office of Edward M. Lavin
8918 Tesoro Drive, Suite 418
San Antonio, TX 78217

Linebarger Goggan Blair
& Sampson, LLP
711 Navarro, Suite 300
San Antonio, TX 78205

Linebarger Goggan Blair
& Sampson, LLP
711 Navarro, Suite 300
San Antonio, TX 78205
Attn: Donald P. Stecker

Lisa Davis, MD
520 Camden
San Antonio, TX 78215

Lowe's
P.O. Box 2918
Mission, KS 66201

Mary Ann B. Miklas, LCSW
19206 Huebner Road, Suite 104
San Antonio, TX 78258

Methodist Ambulatory Surgery Hospital NW
P.O. Box 2098
San Antonio, TX 78297

Methodist Stone Oak Hospital
P.O. Box 99400
Louisville, KY 40269

NCO Financial Systems, Inc.
507 Prudential Road
Horsham, PA 19044

Ortho Plus Inc.
P.O. Box 690633
San Antonio, TX 78269-0633

Pinnacle Anesthesia Consultants
13601 Preston Rd., Suite 1000W
Dallas, TX 75240-4911

Premium Financial Specialists, Inc.
P.O. Box 6580
Chelmsford, MA 01824-0980

Quiroz Adult Medicine Clinic PA
155 E. Sonterra Boulevard
Suite 111
San Antonio, TX 78258

R.L. "Trey" Wilson, Esq.
1202 W. Bitters, Bldg. 1
Suite 1204
San Antonio, TX 78216

River City Emergency Phys
P.O. Box 298
San Antonio, TX 78291

RJM Acquisitions, LLC
575 Underhill Blvd., Suite 224
Syosset, NY 11791

Robert Gonzalez
218 Northill
San Antonio, TX 78201

Robert N. Ray
Attorney at Law
4502 Centerview, Suite 200
San Antonio, TX 78228-1317

San Antonio Express News
P.O. Box 2171
San Antonio, TX 78297-2171

Southwest Texas Publishing, Inc.
6531 FM 78, Suite 110-481
San Antonio, TX 78244

Specialized Collection Systems, Inc.
P.O. Box 441508
Houston, TX 77244-1508

Sprint
P.O. Box 172408
Denver, CO 80217-2408
Attn: Bankruptcy

Sylvia Romo, RTA
P.O. Box 839950
San Antonio, TX 78283-3950

Synerprise Consulting Services, Inc.
2809 Regal Road, Suite 107
Plano, TX 75075

The San Antonio Orthopaedic Group
84 N.E. Loop 410, Suite 184
San Antonio, TX 78216

The San Antonio Orthopaedic Group
84 NE Loop 410, Suite 184
San Antonio, TX 78216

Toyota Financial Services
P.O. Box 8026
Cedar Rapids, IA 52409-8026

United States Attorney
601 N.W. Loop 410, Suite 600
San Antonio, Texas 78216

United States Trustee
P.O. Box 1539
San Antonio, TX 78295-1539

Warren, Drugan & Barrows, P.C.
800 Broadway
San Antonio, TX 78215

West Asset Management, Inc.
2703 N. Highway 75
Sherman, TX 75090

B 22C (Official Form 22C) (Chapter 13) (04/10)In re: **Ronald J. Reyes, Sr.****Liza A. Reyes**

Case Number:

According to the calculations required by this statement:

- The applicable commitment period is 3 years.
 The applicable commitment period is 5 years.
 Disposable income is determined under § 1325(b)(3).
 Disposable income is not determined under § 1325(b)(3).

(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

Part I. REPORT OF INCOME					
Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. <input type="checkbox"/> Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10. b. <input checked="" type="checkbox"/> Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 2-10.					
1	All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.			Column A Debtor's Income	Column B Spouse's Income
2	Gross wages, salary, tips, bonuses, overtime, commissions.			\$0.00	\$0.00
3	Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV.				
	a. Gross receipts	\$6,522.00	\$0.00		
	b. Ordinary and necessary business expenses	\$0.00	\$0.00		
	c. Business income	Subtract Line b from Line a		\$6,522.00	\$0.00
4	Rent and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part IV.				
	a. Gross receipts	\$0.00	\$0.00		
	b. Ordinary and necessary operating expenses	\$0.00	\$0.00		
	c. Rent and other real property income	Subtract Line b from Line a		\$0.00	\$0.00
5	Interest, dividends, and royalties.			\$0.00	\$0.00
6	Pension and retirement income.			\$0.00	\$0.00
7	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse.			\$0.00	\$0.00
8	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:				
	Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$0.00	Spouse \$0.00	\$0.00	\$0.00
9	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.				
	a.				
	b.			\$0.00	\$0.00

B 22C (Official Form 22C) (Chapter 13) (04/10)

10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s).	\$6,522.00	\$0.00
11	Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.		\$6,522.00

Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERIOD

12	Enter the amount from Line 11.	\$6,522.00
13	Marital adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spouse, enter on Line 13 the amount of income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of you or your dependents and specify, in the lines below, the basis for excluding this income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.	
	a.	
	b.	
	c.	
	Total and enter on Line 13.	\$0.00
14	Subtract Line 13 from Line 12 and enter the result.	\$6,522.00
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 and enter the result.	\$78,264.00
16	Applicable median family income. Enter the median family income for applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	
	a. Enter debtor's state of residence: <u>Texas</u>	b. Enter debtor's household size: <u>2</u>
		\$55,660.00
17	Application of § 1325(b)(4). Check the applicable box and proceed as directed.	
	<input type="checkbox"/> The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment period is 3 years" at the top of page 1 of this statement and continue with this statement.	
	<input checked="" type="checkbox"/> The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitment period is 5 years" at the top of page 1 of this statement and continue with this statement.	

Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE INCOME

18	Enter the amount from Line 11.	\$6,522.00
19	Marital adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.	
	a.	
	b.	
	c.	
	Total and enter on Line 19.	\$0.00

B 22C (Official Form 22C) (Chapter 13) (04/10)

20	Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.	\$6,522.00
21	Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 12 and enter the result.	\$78,264.00
22	Applicable median family income. Enter the amount from Line 16.	\$55,660.00
23	<p>Application of § 1325(b)(3). Check the applicable box and proceed as directed.</p> <p><input checked="" type="checkbox"/> The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is determined under § 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement.</p> <p><input type="checkbox"/> The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is not determined under § 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. DO NOT COMPLETE PARTS IV, V, OR VI.</p>	

Part IV. CALCULATION OF DEDUCTIONS FROM INCOME**Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)**

24A	National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)		\$985.00																
24B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 16b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B.																		
	<table border="1"> <thead> <tr> <th colspan="2">Household members under 65 years of age</th> </tr> </thead> <tbody> <tr> <td>a1. Allowance per member</td> <td>\$60.00</td> </tr> <tr> <td>b1. Number of members</td> <td>2</td> </tr> <tr> <td>c1. Subtotal</td> <td>\$120.00</td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th colspan="2">Household members 65 years of age or older</th> </tr> </thead> <tbody> <tr> <td>a2. Allowance per member</td> <td>\$144.00</td> </tr> <tr> <td>b2. Number of members</td> <td></td> </tr> <tr> <td>c2. Subtotal</td> <td>\$0.00</td> </tr> </tbody> </table>		Household members under 65 years of age		a1. Allowance per member	\$60.00	b1. Number of members	2	c1. Subtotal	\$120.00	Household members 65 years of age or older		a2. Allowance per member	\$144.00	b2. Number of members		c2. Subtotal	\$0.00	\$120.00
Household members under 65 years of age																			
a1. Allowance per member	\$60.00																		
b1. Number of members	2																		
c1. Subtotal	\$120.00																		
Household members 65 years of age or older																			
a2. Allowance per member	\$144.00																		
b2. Number of members																			
c2. Subtotal	\$0.00																		
25A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)		\$419.00																
25B	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. DO NOT ENTER AN AMOUNT LESS THAN ZERO.																		
	<table border="1"> <tr> <td>a. IRS Housing and Utilities Standards; mortgage/rent expense</td> <td>\$838.00</td> </tr> <tr> <td>b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47</td> <td>\$653.00</td> </tr> <tr> <td>c. Net mortgage/rental expense</td> <td>Subtract Line b from Line a.</td> </tr> </table>		a. IRS Housing and Utilities Standards; mortgage/rent expense	\$838.00	b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47	\$653.00	c. Net mortgage/rental expense	Subtract Line b from Line a.	\$185.00										
a. IRS Housing and Utilities Standards; mortgage/rent expense	\$838.00																		
b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47	\$653.00																		
c. Net mortgage/rental expense	Subtract Line b from Line a.																		
26	Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:																		

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27A	<p>Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.</p> <p>Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 or more. If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</p>	\$478.00									
27B	<p>Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</p>	\$0.00									
28	<p>Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 or more Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. DO NOT ENTER AN AMOUNT LESS THAN ZERO.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">a.</td> <td>IRS Transportation Standards, Ownership Costs</td> <td style="text-align: right;">\$496.00</td> </tr> <tr> <td>b.</td> <td>Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47</td> <td style="text-align: right;">\$428.00</td> </tr> <tr> <td>c.</td> <td>Net ownership/lease expense for Vehicle 1</td> <td style="text-align: right;">Subtract Line b from Line a.</td> </tr> </table>	a.	IRS Transportation Standards, Ownership Costs	\$496.00	b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47	\$428.00	c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$68.00
a.	IRS Transportation Standards, Ownership Costs	\$496.00									
b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47	\$428.00									
c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.									
29	<p>Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. DO NOT ENTER AN AMOUNT LESS THAN ZERO.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">a.</td> <td>IRS Transportation Standards, Ownership Costs</td> <td style="text-align: right;">\$496.00</td> </tr> <tr> <td>b.</td> <td>Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47</td> <td style="text-align: right;">\$185.40</td> </tr> <tr> <td>c.</td> <td>Net ownership/lease expense for Vehicle 2</td> <td style="text-align: right;">Subtract Line b from Line a.</td> </tr> </table>	a.	IRS Transportation Standards, Ownership Costs	\$496.00	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	\$185.40	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$310.60
a.	IRS Transportation Standards, Ownership Costs	\$496.00									
b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	\$185.40									
c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.									
30	<p>Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self-employment taxes, social-security taxes, and Medicare taxes. DO NOT INCLUDE REAL ESTATE OR SALES TAXES.</p>	\$991.00									
31	<p>Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. DO NOT INCLUDE DISCRETIONARY AMOUNTS, SUCH AS VOLUNTARY 401(K) CONTRIBUTIONS.</p>	\$0.00									
32	<p>Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. DO NOT INCLUDE PREMIUMS FOR INSURANCE ON YOUR DEPENDENTS, FOR WHOLE LIFE OR FOR ANY OTHER FORM OF INSURANCE.</p>	\$50.00									
33	<p>Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. DO NOT INCLUDE PAYMENTS ON PAST DUE OBLIGATIONS INCLUDED IN LINE 49.</p>	\$0.00									

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34	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.	\$0.00
35	Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare--such as baby-sitting, day care, nursery and preschool. DO NOT INCLUDE OTHER EDUCATIONAL PAYMENTS.	\$0.00
36	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. DO NOT INCLUDE PAYMENTS FOR HEALTH INSURANCE OR HEALTH SAVINGS ACCOUNTS LISTED IN LINE 39.	\$230.00
37	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service--such as pagers, call waiting, caller id, special long distance, or internet service--to the extent necessary for your health and welfare or that of your dependents. DO NOT INCLUDE ANY AMOUNT PREVIOUSLY DEDUCTED.	\$300.00
38	Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37.	\$4,136.60

Subpart B: Additional Living Expense Deductions**Note: Do not include any expenses that you have listed in Lines 24-37**

39	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.	
a.	Health Insurance	\$1,087.00
b.	Disability Insurance	\$0.00
c.	Health Savings Account	\$0.00
	Total and enter on Line 39 IF YOU DO NOT ACTUALLY EXPEND THIS TOTAL AMOUNT, state your actual total average monthly expenditures in the space below:	\$1,087.00
40	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. DO NOT INCLUDE PAYMENTS LISTED IN LINE 34.	\$0.00
41	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.	\$0.00
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. YOU MUST PROVIDE YOUR CASE TRUSTEE WITH DOCUMENTATION OF YOUR ACTUAL EXPENSES, AND YOU MUST DEMONSTRATE THAT THE ADDITIONAL AMOUNT CLAIMED IS REASONABLE AND NECESSARY.	
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. YOU MUST PROVIDE YOUR CASE TRUSTEE WITH DOCUMENTATION OF YOUR ACTUAL EXPENSES, AND YOU MUST EXPLAIN WHY THE AMOUNT CLAIMED IS REASONABLE AND NECESSARY AND NOT ALREADY ACCOUNTED FOR IN THE IRS STANDARDS.	\$0.00

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44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) YOU MUST DEMONSTRATE THAT THE ADDITIONAL AMOUNT CLAIMED IS REASONABLE AND NECESSARY.				
45	Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). DO NOT INCLUDE ANY AMOUNT IN EXCESS OF 15% OF YOUR GROSS MONTHLY INCOME.				\$200.00
46	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45.				\$1,287.00
Subpart C: Deductions for Debt Payment					
47	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.				
	Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?	
a.	Accion Texas	equipment	\$152.00	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	
b.	Chase Home Finance LLC	218 Northill, San Antonio, TX	\$653.00	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	
c.	SSFCU	2005 Jaguar	\$185.40	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	
	(See continuation page.)		Total: Add Lines a, b and c		\$1,446.40
48	Other payments on secured claims. If any of the debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.				
	Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount		
a.					
b.					
c.					
			Total: Add Lines a, b and c		\$0.00
49	Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. DO NOT INCLUDE CURRENT OBLIGATIONS, SUCH AS THOSE SET OUT IN LINE 33.				\$58.33
50	Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense.				
a.	Projected average monthly chapter 13 plan payment.		\$1,000.00		
b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)		10 %		
c.	Average monthly administrative expense of chapter 13 case		Total: Multiply Lines a and b		\$100.00
51	Total Deductions for Debt Payment. Enter the total of Lines 47 through 50.				\$1,604.73
Subpart D: Total Deductions from Income					
52	Total of all deductions from income. Enter the total of Lines 38, 46 and 51.				\$7,028.33

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Part V. DETERMINATION OF DISPOSABLE INCOME UNDER § 1325(b)(2)																	
53	Total current monthly income. Enter the amount from Line 20.	\$6,522.00															
54	Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.																
55	Qualified retirement deductions. Enter the monthly total of (a) all amounts withheld by your employer from wages as contributions for qualified retirement plans, as specified in § 541(b)(7) and (b) all required repayments of loans from retirement plans, as specified in § 362(b)(19).	\$0.00															
56	Total of all deductions allowed under § 707(b)(2). Enter the amount from Line 52.	\$7,028.33															
57	Deduction for special circumstances. If there are special circumstances that justify additional expenses for which there is no reasonable alternative, describe the special circumstances and the resulting expenses in lines a-c below. If necessary, list additional entries on a separate page. Total the expenses and enter the total in Line 57. YOU MUST PROVIDE YOUR CASE TRUSTEE WITH DOCUMENTATION OF THESE EXPENSES AND YOU MUST PROVIDE A DETAILED EXPLANATION OF THE SPECIAL CIRCUMSTANCES THAT MAKE SUCH EXPENSES NECESSARY AND REASONABLE.																
	<table border="1"> <thead> <tr> <th></th> <th>Nature of special circumstances</th> <th>Amount of expense</th> </tr> </thead> <tbody> <tr> <td>a.</td> <td></td> <td></td> </tr> <tr> <td>b.</td> <td></td> <td></td> </tr> <tr> <td>c.</td> <td></td> <td></td> </tr> <tr> <td></td> <td style="text-align: right;">Total: Add Lines a, b, and c</td> <td>\$0.00</td> </tr> </tbody> </table>		Nature of special circumstances	Amount of expense	a.			b.			c.				Total: Add Lines a, b, and c	\$0.00	
	Nature of special circumstances	Amount of expense															
a.																	
b.																	
c.																	
	Total: Add Lines a, b, and c	\$0.00															
58	Total adjustments to determine disposable income. Add the amounts on Lines 54, 55, 56, and 57 and enter the result.	\$7,028.33															
59	Monthly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53 and enter the result.	(-\$506.33)															

Part VI: ADDITIONAL EXPENSE CLAIMS																	
60	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.																
	<table border="1"> <thead> <tr> <th></th> <th>Expense Description</th> <th>Monthly Amount</th> </tr> </thead> <tbody> <tr> <td>a.</td> <td></td> <td></td> </tr> <tr> <td>b.</td> <td></td> <td></td> </tr> <tr> <td>c.</td> <td></td> <td></td> </tr> <tr> <td></td> <td style="text-align: right;">Total: Add Lines a, b, and c</td> <td>\$0.00</td> </tr> </tbody> </table>		Expense Description	Monthly Amount	a.			b.			c.				Total: Add Lines a, b, and c	\$0.00	
	Expense Description	Monthly Amount															
a.																	
b.																	
c.																	
	Total: Add Lines a, b, and c	\$0.00															
Part VII: VERIFICATION																	
61	I declare under penalty of perjury that the information provided in this statement is true and correct. <i>(If this is a joint case, both debtors must sign.)</i>																
	Date: <u>06/24/2010</u>	Signature: <u>/s/ Ronald J. Reyes, Sr.</u> Ronald J. Reyes, Sr.															
	Date: <u>06/24/2010</u>	Signature: <u>/s/ Liza A. Reyes</u> Liza A. Reyes															

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Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?
Sylvia Romo, RTA	personal property	\$28.00	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
Toyota Financial Services	2008 Toyota Tundra	\$428.00	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no